Fill in this information to identify your case:					
Debtor 1 _	SADIQA First Name	ALI YA Middle Name	BROWN Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for th	ne: Distr	rict of		
Case number	(If known)	11-401			

2019 MAY 17 AM 9: 49
U.S. BANKRUPTCY COURT
DISTRICT OF MARY Check if this is an amended filling

### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	s 400,000
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$ 404, 734.55
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	<u>\$ 583,489</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 583,489 \$ 46,585
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$ 630,074
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	s 3,019,16
Copy your combined monthly income from line 12 of Schedule I	
5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	s 3,019.16 s 2920

Official Form 106Sum

### Case 19-16157 Doc 10 Filed 05/17/19 Page 2 of 31

Debtor 1 First Name Middle Name Last Name	ase number (if known)						
Part 4: Answer These Questions for Administrative and Statistical Records							
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?							
■ No. You have nothing to report on this part of the form. Check this box and submit this f ■ Yes	form to the court with your oth	ner schedules.					
7. What kind of debt do you have?							
Your debts are primarily consumer debts. Consumer debts are those "incurred by ar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.		sonal,					
Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	rt of the form. Check this box	and submit					
8. From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ 3,019.16					
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:  Total claim							
From Part 4 on Schedule E/F, copy the following:							
9a. Domestic support obligations (Copy line 6a.)	\$ <u>Ø</u>						
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>s                                    </u>	_					
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<b>\$</b>	_					
9d. Student loans. (Copy line 6f.)	\$	_					
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>Ø</u>	_					
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	_					
9g. <b>Total.</b> Add lines 9a through 9f.	\$	_					

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Fill in this information to identify your ca	ase and this	filing:		
Bearing	011110	7702454		
Debtor 1 PSADIA Middle	/1/4/17 le Name	BROWN Last Name		
Debtor 2				
	e Name	Last Name		
United States Bankruptcy Court for the:	District	of		
Case number			_	<b></b>
			Ļ	Check if this is an amended filing
0.00				amended ming
Official Form 106A/B				
Schedule A/B: Pro	perty	· •		12/15
		List an asset only once. If an asset fits in more		
Part 1: Describe Each Residence,	own). Answe	e space is needed, attach a separate sheet to to revery question.  and, or Other Real Estate You Own or Ha in any residence, building, land, or similar pro	ive an interest in	, washaridi payas,
No. Go to Part 2.				
Yes. Where is the property?		Marie A. C. Alexandra A. G. Carrella and C. Ca	The first of the state of the s	en i Martina de la composición del composición de la composición d
		What is the property? Check all that apply.  Single-family home	Do not deduct secured of	
1.1. 1/5// GEM/N/ LAND Street address, if available, or other de	<u> </u>	Duplex or multi-unit building	the amount of any secured claims on Schedule of Creditors Who Have Claims Secured by Propert	
Street address, if available, or other de	escription	☐ Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		Land	\$	\$ 400,000
FORT WASHINGTON N	10 20744	Investment property Timeshare	Describe the nature	of your ownership
City State	ZIP Code	Other	interest (such as fee the entireties, or a lif	simple, tenancy by
		Who has an interest in the property? Check one		e estate), if known.
PRINCE GEORGES	•	Debtor 1 only	-	
County		Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
		At least one of the debtors and another		
		Other information you wish to add about this i property identification number:	tem, such as local	
If you own or have more than one, list he	ere:	-		
	1	What is the property? Check all that apply.	Do not deduct secured cla	sims or exemptions. Put
1.2.		Single-family home	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Street address, if available, or other de	scription	☐ Duplex or multi-unit building☐ Condominium or cooperative	an Alberta Santa San	and the second content of the second of the
		Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
		Investment property	B 11 41 4	
City State	ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee	simple, tenancy by
	,	Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
		Debtor 1 only		
County		Debtor 2 only		
-	_	Debtor 1 and Debtor 2 only		mmunity property
	(	At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this its	em, such as local	

Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ₩ No ☐ Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Case 19-16157

Debtor 1

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Debtor 1

Middle Name

Last Name

Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. Cash  Examples: Money you	have in your wallet, in your hor	me, in a safe deposit box, and on hand whe	n vou file vour petition	7876 (1965) 1966 (1966) 1966 (1966) 1966 (1966) 1966 (1966) 1966 (1966) 1966 (1966) 1966 (1966) 1966 (1966) 1
₩ No	·	, , , , , , , , , , , , , , , , , , , ,	, year me year penden	
			· Cash:	s
and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit nultiple accounts with the same institution, li	unions, brokerage houses st each	·
Yes		Institution name:		
	17.1. Checking account:	Bank of America		s 12.87
	17.2. Checking account:		10.	
	17.3. Savings account;	Wells Fargo		\$ 1,508.39
	17.4. Savings account:			• 1,000.07
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
				\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts		
				6
				\$
				\$
9. Non-publicly traded st an LLC, partnership, a	tock and interests in incorpor	rated and unincorporated businesses, inc	cluding an interest in	
No	Name of entity:			
Yes. Give specific			% of ownership:	s Ø
information about them			0% %	\$ \$
			0% %	\$
				Ψ

Case 19-16157 Doc 10 Filed 05/17/19 Page 6 of 31 Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). M No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ No Yes. Give specific 50% ownership of website domain & trademark information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **□**/N₀ ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you D No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. .... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ₩ No Yes. Give specific information.....

First Name	Middle N	ame last l	Name		Case number (if known)	
			Harris			
40. Machinery, fixtures	. aguinma	nt cumplies veu	u uaa la bualanaa		.1	
40. Machinery, fixtures	s, equipme	nt, supplies you	i use in business, a	ing tools of your tra	ade .	
☑ No						
Yes. Describe	gastimical and the second		State of the Control	CF CPS CRAFT CPS PERCENT CPS		· · · · · · · · · · · · · · · · · · ·
Tes. Describe	••••					s (7)
	Ĺ					<b>*</b>
						Account of the second of the s
41. Inventory						
□ No				delication manufers equal control collection delication and property and control of a section and a section of		
		Control of the second section of the second	and an entire production of the anti-state and party of the state of the state of the state of the state of the	delication manufer in quadrication continuate continuate representation and experience of excession and experience.	Haddell with me deliment on a 1/1000 state that the last one of the state of the st	and the same of th
Yes. Describe						s /~
	Entretorior construction	Marine Period (1971) (1971) (1971) (1974) (1974) (1974) (1974) (1974) (1974) (1974) (1974) (1974) (1974) (1974)	- NEW PRINCES CONTROL	Problem votes telephological and anticopy of the total content of the content of	Millership shares, e.g. (1942) is distinct to the constraint of th	
						·
42. Interests in partner	ships or jo	int ventures				
□ No						
/						
Yes. Describe		f entity:			% of ownership	
	No	WDin (	Marchan Market	r <del>-/</del>	70 Of Ownership	
	110	w Dug 2 C	JUSI GRIVIO	C1	<u> </u>	s 2,500
	_Hé	Ipina Ho	consignment and 3			\$ (%
		1 )				<del>-</del>
					%	\$
43. Customer lists, mai	iling lists, d	or other compila	ations			
ەلار ◘						
Yes. Do your lis	ts include	personally iden	ntifiable information	/ac defined in 11 LL	S.C. S. 404/44 A)\\0	
Jo jou		percentally lacif	MINADIO IIIIOIIIIAUOII	(as defined in 11 U.	.S.C. 9 101(41A))?	
☐ No				Colombia Charles and Anna Carles Colombia		
☑ Yes. De	scribe	Part of the second seco			ODER MILE O POSSIBLE O PROPERTO SPANIS DE L'ARTICLE L'ARTICLE MINÈS DE L'ARTICLE MINÈS DE L'ARTICLE SPANIS DE L'ARTICLE MINÈS DE L'ARTICLE DE L'ARTI	The state of the s
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44. Any business-relate	ea property	you did not air	ready list			
<b>□</b> No						
Yes. Give specifi	ic					$\sim$
information						\$
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		****	W 7			2
						\$
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	***************************************			······································		\$
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45. Add the dollar value	of all of y	our entries from	n Part 5. including :	nv entries for page	s vou have attached	
for Part 5. Write that	t number h	ere	.,	, cc. pug.		\$ 3,000
				•••••••••••••••••••••••••••••		
and the second of the second o		Settler of the world of the con-	and the second of the second o	99393 ca	The state of the s	
						The control of the co
Part 6: Describe	A					
Part of Describe	Any Farm	- and Comme	rcial Fishing-Rela	ated Property Yo	u Own or Have an Interest	In.
ii you own	or nave an	interest in farm	nland, list it in Part	1.		
		<del>"</del>		*		
46. Do you own or have	anv legal (	or equitable inte	erest in any farm. o	r commercial fichin	or related property?	
No. Go to Part 7.	,		sissini uniy rumi- o	ooninioloidi iisiiii	ig-related property:	
	_					
Yes. Go to line 47	<b>′</b> .					
						Current value of the
						portion you own?
						Do not deduct secured claims
47. <b>Farm animals</b>						or exemptions.
Examples: Livestock,	poultry, far	m-raised fish				
<b>□</b> No						
Yes	The second secon		e de de militario de la composição de la Sanda e relació de mesos portos por portos per el mesos de la composi La composição de la compo	Control of the Contro		-MARIOSEN Y
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Debtor 1

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					33355		
Fill in this ir	formation to identify yo	our case:					
Debtor 1	SADIOA	ALIYA	BROW	N			
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Dist	rict of				
Case number (If known)				•			eck if this is ar ended filing
				······································		anie	anded lining
Official F	Form 106C						
	ule C: The	Prop	erty You	Claim as	Exemp	t	04/19
Be as complete Using the prop space is neede	e and accurate as possib erty you listed on Schede ed, fill out and attach to the case number (if known)	le. If two marricule A/B: Proper nis page as ma	ed people are filing to	gether, both are equa VB) as your source, li	lly responsible for s	supplying correct inform you claim as exempt. If	f more
of any applica retirement fur limits the exe	r amount as exempt. All able statutory limit. Son ads.—may be unlimited amption to a particular detect to the applicable stated	ne exemptions in dollar amou ollar amount a	:—such as those for int. However, if you and the value of the	health aids, rights t claim an exemption	o receive certain of 100% of fair ma	benefits, and tax-exem arket value under a lav	npt v that
Part 1: lo	lentify the Property	You Claim a	s Exempt				
1. Which se	t of exemptions are you	ı claiming? Ch	neck one only, even it	vour spouse is filing v	vith vou		
🔲 You a	re claiming state and fed	eral nonbankru	ptcy exemptions. 11		mar you.		
You a	re claiming federal exem	ptions. 11 U.S.	C. § 522(b)(2)				
O F							
2. For any p	roperty you list on Sch	edule A/B that	you claim as exem	ot, fill in the informat	tion below.		
Brief des Schedule	eription of the property as A/B that lists this prope		urrent value of the ortion you own	Amount of the exen	option you claim	Specific laws that all	ow exemption
		C	opy the value from chedule A/B	Check only one box f	or each exemption.		
Brief descriptio	n: Primary r	esidence s	400,000	□s			
Line from	···			100% of fair ma			
Schedule	A/B:			any applicable s	tatutory limit		
Brief descriptio	n·	\$		□s			
Line from	II			100% of fair mai			
Schedule	A/B:			any applicable s	tatutory limit		
Brief descriptio	n: ————	\$		□ s	_		
Line from	4.0			100% of fair mar		•	
Schedule	A/B:			any applicable s	tatutory limit		
	laiming a homestead ex						
	adjustment on 4/01/22 a	and every 3 year	ars after that for cases	s filed on or after the d	late of adjustment.)	)	
☑ No ☐ Yes. D	id you acquire the proper	rty covered by	the exemption within	1 215 dave hefere	I filed this acces		
□ N		ty outlied by	are everubaou wataan	1,210 days before you	i med this case?		
<b>□</b> Y	es						
						The thermal course in the	

irst Name	Middle	Name

l ast Name

Case number (if known)\_

#### Part 2:

#### **Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you olaim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$		r i dalam dalam dari parta 20 o tarih dalam dalam 3881 dalam
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	Professional Control of the Control
Brief description:	\$	<b></b>	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b> \$	en e
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b>	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description: ————————————————————————————————————	\$	<b>\_</b> \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>s</b>	
ine from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief escription:	\$	<b>s</b>	The second se
ine from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	<del></del>
Brief lescription: ————————————————————————————————————	\$	<b></b>	**************************************
ine from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
erief escription:	\$	□ <b>s</b>	
ine from Cohedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
rief escription:	\$	<b>s</b>	The state of the s
ine from		100% of fair market value, up to any applicable statutory limit	
rief escription:	\$	<b>u</b> s	**************************************
ine from chedule A/B: ———		100% of fair market value, up to any applicable statutory limit	Market and the second
rief			en e
escription:	<b>J</b>	\$ 100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of

#### Case 19-16157 Doc 10 Filed 05/17/19 Page 10 of 31

	9-1013 <i>1</i> D	oc 10 Thea 05/17/19 T	age 10 01 31		
Fill in this information to identify your co	ase:			•	
Debtor 1 SADIGA F	7214A	BRONN			
Debtor 2 (Spouse, if filing) First Name Midd	le Name				
		Last Name			
United States Bankruptcy Court for the:	District of				
Case number		-		Chook	if this is an
					ed filing
Official Form 106D					J
Schedule D: Credito	re Who L	lava Claima Sagur	ad by Dra-		
					12/15
Be as complete and accurate as possible information. If more space is needed, conditional pages and the space is needed, conditional pages and the space is needed.	pv the Additiona	Page, fill it out, number the entries	ually responsible f and attach it to this	or supplying correct form. On the top of	t 'anv
additional pages, write your name and c	ase number (if kr	nown).		ioini. On the top of	arry
Do any creditors have claims secured	by your property	.2			
No. Check this box and submit this fo	orm to the court wi	th vour other schedules. You have nothi	na else to report on	this form	
Yes. Fill in all of the information below	W.	in your other schedules. You have noth	ng else to report on	inis torm.	
	•••				
Part 1: List All Secured Claims					
			Column A	Column B	Column C
2. List all secured claims. If a creditor has	more than one se	cured claim, list the creditor separately	Amount of claim	Value of collateral	Unsecured
for each claim. If more than one creditor As much as possible, list the claims in all	nas a particular c phabetical order a	aim, list the other creditors in Part 2.	Do not deduct the	that supports this	portion
보는 다음을 들는 종리의 기자 사람이 개발하지 않는데 있다.   2   1			value of collateral.	olaim	Ifany
2.1 Shellpoint Mortgage Service Creditor's Nayhe	Describe the p	roperty that secures the claim:	\$ 583,489	\$ 400,000	\$
Creditor's Nayfine			1	•	7
PO Box 74039 Number Street	- Prim	ary Residence			
Steel Steel		you file, the claim is: Check all that apply.	j		
	Contingent	you me, and orann is. Oneok an that apply.			
Cincinati, OH 45274-00 City State ZIP Code	39 Unliquidated	l			
City 'State ZIP Code	☐ Disputed				
Who owes the debt? Check one.		Check all that apply.			
Debtor 1 only	☑ An agreeme	nt you made (such as mortgage or secured			
Debtor 2 only	Cai ioaii)				
Debtor 1 and Debtor 2 only		(such as tax lien, mechanic's lien)			
At least one of the debtors and another		en from a lawsuit ling a right to offset)			
Check if this claim relates to a	- Other (includ	ing a right to onset)	-		
oommunity debt  Date debt was incurred 1/ 2004					
2.2	The state of the s	aooount number OOOS	AND		REACONS CONTRACTOR DE MARE ARMA
Creditor's Name	Describe the p	roperty that secures the claim:	\$	\$	B
Cleditor's Natife					
Number Street	-				
	As of the date	you file, the claim is: Check all that apply.	'		
	Contingent				
City State ZIP Code	_ Unliquidated				
·	☐ Disputed				
Who owes the debt? Check one.		Check all that apply.			
Debtor 1 only Debtor 2 only	An agreemer car loan)	nt you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only		(such as tax lien, mechanic's lien)			
At least one of the debtors and another		n from a lawsuit			
☐ Check if this claim relates to a	Other (includ	ing a right to offset)			
oommunity debt					
Date debt was incurred	Last 4 digits of	account number			
Add the dollar value of your entries in			\$ 583,489		THE RESIDENCE OF THE PERSON OF

Case 19-16157 Doc 10 Filed 05/17/19 Page 11 of 31

Debtor 1 Case number (if known)

Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		7		
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unliquidated			
State ZIF GODE	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was inourred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	i
Creditor's Name		1	¥	·
Number Street				
Humber Street	As of the date you file, the claim is: Check all that apply.	]		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	,	•		
Date debt was incurred	Last 4 digits of account number			
			TO THE STATE THE STATE OF THE S	Takkan tahun ang mang takan pang ang mang
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number	Westerland Company of the Company of		
Add the dollar value of your entries	in Column A on this page. Write that number here:	<b>s</b>		
If this is the last page of your form, Write that number here:	add the dollar value totals from all pages.	\$		Na / Million and and and and and and and and and an

Case number (if known)\_

E	art 2:	List Others to	Be Notified for a Deb	That You Airead	ly Listed
y	ou have m	ore than one oredit		o someone eise, list i It vou listed in Part 1	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
	]	Marie de la Militaria de la Companya		고하다 1.60명 (1.10명 1.10명) -	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
					Last 4 digits of account number
	Number	Street			
					<u>_</u>
	City				
-	City	**************************************	State	ZIP Code	70000000000000000000000000000000000000
	ļ				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			<del></del>
					<del>_</del> .
	City		State	ZIP Code	<del>-</del> [
	MARIE CONTENTATION SERVICE	TETER THAN I THE FREE SE FREE SHE SHE PETER THE FREE FREE FREE FREE FREE FREE FREE FR	opi interpresent a company rappiament e extrapristant interpresentation in the extraprist in a solvent	TO PROPERTY OF A STATE OF THE S	Andrews and the second
	Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
					Last 4 digits of account number
	Number	Street			<del></del> 
				- · · · · · · · · · · · · · · · · · · ·	_
	<u> </u>				
	City	TE FOR THE E YEAR OF THE STATE	State	ZIP Code	DOTOSpania Comp. Transporter automorphic a
╝					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
				•	
	•				<del>-</del>
	City		State	ZIP Code	-
Ĩ	its eta eta ilia territaria errangan eta errangan eta	त्रके का विकास के किया है जिस का माने के किया है जो किया है कि का किया है कि किया है कि किया है कि का किया है 	e independent sower voor zott ze daar die die bevoorde dage son, en en daarde gevoer voor hat wegen een in een	and the state and the state of	оположной може и положной выпользований выше в положной выположной выпользований в положной выпользований выпользований в положной в положной в положной выпользований в положной в
	Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
					Last 4 digits of account number
	Number	Street			
					-
	City				
Post	only commission of the second second	TOTAN CENTRAL SERVICE SERVER S	<b>State</b> ************************************	ZIP Code	
┙					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			- · · ·
	City		State	ZIP Code	_
Ţ	Prin	t	Save As	Add Attachr	ment Reset

			Case 19-161	57 Do	c 10	Filed 05/17	/19	Page 13	of 31		
Fil	l in this in	formation to ide	entify your case:								
De	btor 1	SA DIQA First Name	A L/	VA.	BK Last Na						
	btor 2 ouse, if filing)	First Name	Middle Name		Last Na	nmo.					
-			or the:								
Ca	se number known)		or trie.	_ District Of _	_						k if this is an
Of	ficial F	Form 106	E/F			**************************************	J				
Sc	hedu	ıle E/F:	 Creditors	. Who	Hav	re Unsec	ure	d Clain	ns		12/15
List A/B: cred need any	the other: Property litors with ded, copy additiona	party to any ex (Official Form of partially secure the Part you no I pages, write y	ecutory contracts 106A/B) and on S ed claims that are	or unexpired of the control of the c	ed lease Executo chedule tries in t	with PRIORITY cost that could result that could result the contracts and D: Creditors Who he boxes on the lend.	It in a c Unexpi Have (	ilaim. Also lis ired Leases (Claims Secur	st executory co Official Form 10 red by Property.	ntracts on So IGG). Do not i If more spac	chedule Include any se is
2.	No. Go Yes. List all of each claim	to Part 2.  your priority un listed, identify w amounts. As mu	rhat type of claim it ich as possible, list	f a creditor I is. If a claim the claims	nas more n has bot in alphab	than one priority under the priority and nonpoletical order according	riority a	mounts, list th	at claim here and ame. If you have	d show both p more than tw	priority and
	unsecured	claims, fill out th	e Continuation Pag	ge of Part 1.	If more t	than one creditor he his form in the instr	olds a p	articular claim	n, list the other cr	editors in Par	13.
\ \ \ \	,		Type of biding see	ine mender	10118 101 t	no min in the mon	dodon t	Jookiet.)	Total olalm	Priority	Nonpriority
2.1	<i>-</i>					·			21	amount	amount
	Priority Cred	<u>cational</u>	<u>Dystems FC</u>	U Last	4 digits	of account number e debt incurred?	' <del></del>		<u>\$ 31,450</u>	\$	\$
in the state of th	PO BO	179 Street		Whe	n was th	e debt incurred?	111	<u>3</u>			
man chart states				— Aso	f the dat	e you file, the clain	ı is: Che	eck all that apply	,		
	-Green	nbell M	D 2070 State ZIP Code	<u>,8</u> 🗖 (	Contingen	•		· · · · · · · · · · · · · · · · · · ·			
4		rred the debt? C			Jnliquidate	ed					
	Debtor		neck one.		Disputed						
	Debtor	-		Type	of PRIC	ORITY unsecured	claim:				
		1 and Debtor 2 on				support obligations					
	At leas	t one of the debtor	s and another			certain other debts yo	ou owe tl	he government			
2.007	☐ Check	if this claim is f	or a community de			death or personal inju					
ti da artis		im subject to off:	set?		ntoxicated		1200	8 4.14			
	☐ No				Other. Spe	ecify $CYCAU$	car	å debt			
22	Yes		t keris samtan da diri dan dan dan da	Delication of the second secon			AFBYELFILIBATION SANGER	alananin dan kecamatan dan	PATTERN STANDARD COMMON	BROOK FOR BUILDING THE CONTROL OF THE SAME	New York and the same associated by the consequence of the same associated by the same as the same associated by the same as
2.2	Priority Cred	die Mac		Last	4 digits	of account number	·		\$ 15134	\$	\$
	•	Jones 1	Branch Dri	we Whe	n was th	e debt incurred?					
	Number	<b>S</b> freet		As o	f the date	you file, the claim	ı is: Che	ck all that apply			
- Branch	<del></del>				Contingent			on all that apply			
	City		State ZIP Code		Jnliquidate						
	Who incu	rred the debt? C	heck one.	<b></b>	Disputed						
100	Debtor			Tune	of DDIC	DITY unconsumed	-1-1				
- The second	Debtor					ORITY unsecured support obligations	viaiM:				
de la companya de la		1 and Debtor 2 on				support obligations certain other debts yo	311 644- A	no government			
t-perjorate in	_	t one of the debtors		П		death or personal inju		=			
The second secon	Check	if this claim is f	or a community de	DT i	ntoxicated		y *VIIIIO	you wate			
an angele gagain a hadi	Is the clai No Yes	m subject to offs	set?	<b>(</b>	Other. Spe	ecify					
marris halden							TO CONTRACT OF THE PARTY OF THE	materials ( access to be consistently already, but the complete extends, but	Problem and the second	control was a service of the control	ner erregeration (1975 - Februar 1984) van 1985 van 1980

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Part 1:	Your PRIORITY	Unsecured Claims —	<b>Continuation Page</b>
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Aft	ter listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number	\$	. \$	\$
	-	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	□ No				
	☐ Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
		Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intoxicated			
		Other. Specify			
	Is the claim subject to offset?				
	No No				
	Yes				WWW.
		I and A disside an account of	\$	•	
	Priority Creditor's Name	Last 4 digits of account number	•	\$ :	<b>.</b>
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PPIOPITY upgestreed eleters			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			j V
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			9
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	— Shook ii tiilo siaiiti is tot a sommunity gest	Other. Specify		- Andrews Confession (States)	
	Is the claim subject to offset?				- Landing Monage
	□ No				dhe Chaid
e i Samageore	Yes				- Land Spiritor
			CONTRACT - DESCRIPTION OF THE PROPERTY AND ADDRESS OF THE PROPERTY OF THE PROP	PATENTIAL AND PROPERTY AND ADDRESS OF THE PARENTY ADDRESS OF THE PARENTY AN	

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	First Name Middle Name Last Name	c	Odd Halling (Filliam)	
Pa	rt 2: List All of Your NONPRIORITY Uns	ecured Claims		
3.	Do any creditors have nonpriority unsecured cl	aims against yo	u?	
	No. You have nothing to report in this part. Sub	omit this form to th	ne court with your other schedules.	
	nonpriority unsecured claim, list the creditor separa	ately for each clair	order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	list claims already
4.1	]			Total claim
	Nonpriority Creditor's Name		Last 4 digits of account number	\$
	N		When was the debt incurred?	
	Number Street			
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	<b>188</b> 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		☐ Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	Yes			
1.2		The second secon	Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code		
	Who incurred the debt? Check one.		☐ Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	Yes			
.3		Constitution and the first section of the section o		
	Nonpriority Creditor's Name		Last 4 digits of account number	\$
			When was the debt incurred?	
	Number Street			
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	,		☐ Contingent	
	Who incurred the debt? Check one.  Debtor 1 only		Unliquidated	
	Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONDRIODITY	
	☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt		Student loans Obligations arising out of a separation agreement or divorce.	
			UDIDATIONS ARSING OUT OF A Separation agreement or discome	

☐ No

Yes

is the claim subject to offset?

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

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Part 2:

### Your NONPRIORITY Unsecured Claims — Continuation Page

	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	\$
Number Street	Annell Mars file dept lubulied i	
Humber Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	•	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other. Specify	
☐ No☐ Yes		
TUS		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name		-
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another		
Check If this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No		
☐ Yes		
		S
Nonpriority Creditor's Name	Last 4 digits of account number	• ****
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
	☐ Disputed	
Debtor 1 only	-	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
■ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
⊒ No ⊒ Yes		

SADIGA Case 19/1618/2000 10 Filed 05/17/19 ase Runge (IF ADVINO OF 31 Last Name Last Name

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

	_			ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
ity		State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber	Street	***		Part 2: Creditors with Nonpriority Unsecured Claims
ity		State	ZIP Code	Last 4 digits of account number
ame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber	Street			Part 2: Creditors with Nonpriority Unsecured
				Last 4 digits of account number
ity	PER A CHINA SHIRE TO CO ARRAGO SHIRE SHIRE SHIRE SHARE SHARE SHIRE SHIRE SHIRE SHIRE SHIRE SHIRE SHIRE SHIRE S	State	ZIP Code	
ame	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·		On which entry in Part 1 or Part 2 did you list the original creditor?
umber	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	0.000			Part 2: Creditors with Nonpriority Unsecured Claims
ty		State	ZIP Code	Last 4 digits of account number
ame	COLUMN CO	PPECONIPOLISMON AND COME PROGRAMMENT FOR COME AND COME AN		On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
ımber	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
ty		State	ZIP Code	Last 4 digits of account number
ame			<del></del>	On which entry in Part 1 or Part 2 did you list the original creditor?
Imber	Stroot	· · · · · · · · · · · · · · · · · · ·	-	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
ty		State	ZIP Code	Last 4 digits of account number
ıme				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
ımber	Street			Part 2: Creditors with Nonpriority Unsecured
<del></del>				Claims
				Last 4 digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 169.
 Add the amounts for each type of unsecured claim.

#### Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Add all other priority unsecured claims.
   Write that amount here.
- 6e. Total. Add lines 6a through 6d.

#### Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

#### Total claim

- 6a. ( )
- 6b. s
- 6c.
- 6d. +s 46,585
- 6e. \$\_\_\_\_\_\_\_

#### Total claim

- 6f.
  - 6f. \$\_\_\_\_\_
- 6g.
- 6h.
  - i. + <u>\$</u>
- 6j. **\$\_\_\_\_\_**

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Debtor Debtor (Spouse United Case r (If know	r 2 r 2 e If filing) d States B number wn)		Middle Name  Middle Name  District (	BROWN Last Name		
Debtor (Spouse United Case r (If knov	r 2 e If filing) I States B number wn)	Bankruptcy Court for the:	: District of	Last Name		
United Case r (If know	e If filing)  I States B  number wn)	Bankruptcy Court for the:	: District of	Last Name	·	
United Case r (if know	l States B number wn)	Bankruptcy Court for the:	: District of	Last Name		
Case r (if know	number wn)					
Offic Sch	wn)	11 10/3		ЭТ		
Sch e as c			<u> </u>			Check if this is an amended filing
Sch						amended ming
e as c	cial F	orm 106G				
e as c	nedu	ile G: Exe	cutory Con	tracts and	Unexpired Leases	12/15
1. Do	ation. If onal pag o you ha i No. Cr i Yes. F st separ tample, nexpired	more space is need the space any executory coneck this box and file fill in all of the informatately each person or rent, vehicle lease, deleases.	ded, copy the addition and case number (if contracts or unexpire this form with the couration below even if the correspondence or company with who	nal page, fill it out, not known).  d leases?  t with your other sche contracts or leases at m you have the contractions for this for	dules. You have nothing else to report on the listed on Schedule A/B: Property (Official ract or lease. Then state what each commin the instruction booklet for more examples.	his form. I Form 106A/B). tract or lease is for (for oles of executory contracts and
Νι	umber	Street		· · · · · · · · · · · · · · · · · · ·	_	
Cit	ty		State ZIP Code		-	
2					ты четыкин тонен тонен ордин это мыргы оргоноруй жүгүндөгө жана оргоноруй байдаг байгар оргоноруй байдаг байгар	and the control of th
Na	ame				_	
Νυ	umber	Street			<del>-</del>	
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.3						
Na	ame					
Nu	umber	Street	-		<b></b>	
Cit	ty	TO COMPANY CONTROL OF THE STATE	State ZIP Code	PROBABILO SATO DE PROGRESSA DE LOS RESPONSAS ANTICOS DE LOS RESPONSAS ANTICOS DE LOS RESPONSAS DE LOS RESPON	A 1800-0000000 Visional Application of the Control	
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Na	ame				<del>-</del>	
Nu	ımber	Street	<del> </del>		_	
Cit	ty		State ZIP Code			
.5	agram with the second second	PRINCED TO A SEA AND TO SEA AND TO SEA AND TO SEA CONTROL OF SEA SEAS AND SEA AND TO SEA AND TO SEA AND TO SEA	and the state of the last and the state of t	talatus Patronomikatikinakaikakaikan kati romin teksoessa montomona saasi mener	TERROTER SERVING AND AND PROTECTION FRANCISM SERVES SECURISSISTED AND SECTION FOR SECURISM SE	HERRESTRUM PROPERTY STEEL FROM THE STEEL FROM THE STEEL STEEL FOR THE STEEL FROM
Na	ame				_	
	ımber	Street			-	
Nu						

inst Name	 Middle Manne	 1 111	

Case number (if known)\_

			1 45		ontracts or Leases		
	Person o	r company w	ith whom you	have the con	tract or lease	What the contract or lease is	for
2 <u>2</u>						in the second of the control of the second o	en e
,	Name						
	Number	Street					
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	Cas			
Fill in this i	information to identify	your case:		
Debtor 1	-SADIQA	ALIYA	BROWN	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	District	of	
	19-16/57	7		
(If known)				Check if this is a amended filing
\fficial	Form 106H			amended many
	Form 106H			
iched	ule H: You	r Codebtor	<u>'S</u>	12/15
	have any codebtors? (	(If you are filing a joint	t case, do not list either spous	e as a codebtor.)
No Yes Within the Arizona, Yes. Yes.	the last 8 years, have y California, Idaho, Louis Go to line 3. Did your spouse, forme	<b>/ou lived in a comm</b> i siana, Nevada, New N er spouse, or legal eq	unity property state or territ Mexico, Puerto Rico, Texas, V uivalent live with you at the ti	pry? (Community property states and territories include //ashington, and Wisconsin.)
Y No Yes  Within the Arizona, Y No. ( Yes.	the last 8 years, have y California, Idaho, Louis Go to line 3. Did your spouse, forme	you lived in a commusiana, Nevada, New Ner spouse, or legal eq	unity property state or territ Mexico, Puerto Rico, Texas, V uivalent live with you at the ti	ory? (Community property states and territories include /ashington, and Wisconsin.)
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Yes  Within the Arizona,  Yes.  No. (Control of the Arizona)  Yes.  No. (Control of the Arizona)  Yes.  No. (Control of the Arizona)  Scheduling Schedulin	che last 8 years, have y California, Idaho, Louis Go to line 3. Did your spouse, forme No Yes. In which communit Name of your spouse, former s Number Street City In 1, list all of your co In line 2 again as a coole D (Official Form 106)	you lived in a commusiana, Nevada, New Mer spouse, or legal equivalent  State  debtors. Do not inclidebtor only if that pe	unity property state or territ Mexico, Puerto Rico, Texas, V uivalent live with you at the tii you live?  ZIP Code ude your spouse as a codelerson is a guarantor or cosi	pry? (Community property states and territories include vashington, and Wisconsin.)  ne?  Fill in the name and current address of that person.  proof if your spouse is filing with you. List the person gner. Make sure you have listed the creditor on
No Yes  Within the Arizona, No. (In Column shown in Schedule Column)	che last 8 years, have y California, Idaho, Louis Go to line 3.  Did your spouse, forme No Yes. In which communit Name of your spouse, former s Number Street  City In 1, list all of your co In line 2 again as a coo Je D (Official Form 108 Je E/F, or Schedule G 6	you lived in a commusiana, Nevada, New Mer spouse, or legal equivalent  State  debtors. Do not inclidebtor only if that pe	unity property state or territ Mexico, Puerto Rico, Texas, V uivalent live with you at the tii you live?  ZIP Code ude your spouse as a codelerson is a guarantor or cosi	pry? (Community property states and territories include vashington, and Wisconsin.)  ne?  Fill in the name and current address of that person.  potor if your spouse is filing with you. List the person gner. Make sure you have listed the creditor on edule G (Official Form 106G). Use Schedule D,
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No Yes  Within the Arizona, Yes.  No. Yes.  No. Yes.  No. Columnshown is Schedule Schedule	che last 8 years, have y California, Idaho, Louis Go to line 3.  Did your spouse, forme No Yes. In which communit Name of your spouse, former s Number Street  City In 1, list all of your co In line 2 again as a coo Je D (Official Form 108 Je E/F, or Schedule G 6	you lived in a commusiana, Nevada, New Mer spouse, or legal equivalent state  State  debtors. Do not includebtor only if that per SD), Schedule E/F (Otto fill out Column 2.	unity property state or territ Mexico, Puerto Rico, Texas, V uivalent live with you at the tii you live?  ZIP Code ude your spouse as a codel erson is a guarantor or cosi fficial Form 106E/F), or Sch	pry? (Community property states and territories include vashington, and Wisconsin.)  ne?  Fill in the name and current address of that person.  potor if your spouse is filing with you. List the person gner. Make sure you have listed the creditor on edule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:

Official Form 106H

City

3.2

3.3

Name

Number

City

Name

Number

Street

Street

Schedule H: Your Codebtors

ZIP Code

State

State

page 1 of \_\_\_\_

☐ Schedule D, line \_\_\_\_

☐ Schedule D, line \_

☐ Schedule E/F, line \_\_

☐ Schedule G, line \_\_\_

☐ Schedule E/F, line \_\_\_\_

☐ Schedule G, line \_\_\_\_\_

First Name

Middle Name

Last Name

Case number (if known)\_

Column	1: Your codebtor			
Column	7. Your codebtor			Column 2: The creditor to whom you owe the de
				Check all schedules that apply
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street	197		Schedule G, line
City		State	ZIP Code	тите жене комприненто нако прину стратория вышения наконартительный информациональный этом этом этом него прин
Name	The state of the s		*	Schedule D, line
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Name				☐ Schedule D, line
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Name			Project de la constitución de la	Schedule D, line
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Number	Street			☐ Schedule G, line
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Name				☐ Schedule D, line
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Number	Street			☐ Schedule G, line
City		State	ZIP Code	
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***************************************	Сиветический Сентинический — 201—3 — година в временений — 2014 годинальной дентинальной дентинальной дентинал	State	ZIP Code	en maria antiqua de la composition della composi
Name				☐ Schedule D, line
				Schedule E/F, line
Number	Street		A. 181	☐ Schedule G, line
City	MATERIAL PROPERTY CONTROL OF THE PROPERTY OF T	State	ZIP Code	
			THE RESERVE OF THE PROPERTY OF	

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Schedule H: Your Codebtors

				•	
Fill in this information to identif	y your case:				
Debtor 1 SADIGA	A1 110	DECEMBLE			
rirst Name	ALI YA Middle Name	Last Name		-	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	e: District of _				
Case number				Check if t	his is:
(If known)				☐ An am	ended filing
255 : 15 4001					plement showing postpetition chapter 13 e as of the following date:
Official Form 106I	_			MM / D	DD / YYYY
Schedule I: Yo	ur Income				12/15
Part 1: Describe Employ	ie top of any additional p	ages, write your na	ame a	ind case number (if k	use. If more space is needed, attach a use. Answer every question.
information.		Debtor 1	iti dha ca milikuwa n	TESSPENING TO SETSFEET AND PROVIDENT OF THE SETSFEET STATES OF THE SETSFEET OF THE SETSFEET OF THE SETSFEET OF	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed  Not employ	yed		Employed  Not employed
Include part-time, seasonal, or self-employed work.	Occupation	Owi	ner		Retirement Specialist
Occupation may include student or homemaker, if it applies.		_			
	Employer's name	New De	92	Consignment	ICMA RC
	Employer's address	5724 CV Number Street	ain	Highway	777 North Capital St. A. Number Street
		1.1		1 1	
		City per M	lavl. Sta	bvvo, MD 20772 te ZIP Code	Washington DC City State ZIP Code
	How long employed th	• -	-		
Part 2: Give Details Abou	t Monthly Income				
Estimate monthly income as o spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	ว. lave more than one employ	ver. combine the info			te \$0 in the space. Include your non-filing
				For Debtor 1	For Debtor 2 or non-filing spouse
<ol><li>List monthly gross wages, sa deductions). If not paid monthly</li></ol>	lary, and commissions (b , calculate what the month	pefore all payroll ly wage would be.	2.	\$ 400	\$ <u>3,973.8</u> 6
3. Estimate and list monthly ove	rtime pay.		3.	+\$	+ \$
. Calculate gross income. Add l	in			. 400	c 7 972 V/

			own)	
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	<b>→</b> 4.	\$ <u>400</u>	\$ 3.973.0	6
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions		- 0	. A NO DI	
5b. Mandatory contributions for retirement plans	5a.	\$	\$ 410.80	
5c. Voluntary contributions for retirement plans	5b. 5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$ <u>80</u>	
5e. Insurance	5e.	\$ (7)	\$ 440	
5f. Domestic support obligations	5f.	\$ 08	\$ Ø	
5g. Union dues	5g.	\$ <i>(7)</i>	\$ Ø	
5h. Other deductions. Specify:	5g. 5h.	+ = 8	+ s Ø	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h		s	\$ <u>1,354.80</u>	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>400</u>	\$ 2,619.06	
List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s	\$ <i>Ø</i>	
8b. Interest and dividends	8b.	s Ø	s A	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent		<del></del>	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	s	\$	
8d. Unemployment compensation 8e. Social Security	8d.	\$	\$	
	8e.	\$	\$ <i>Q</i>	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	nce 8f.	s <i>O</i>	s 16	
8g. Pension or retirement income			1	
	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$ <u>Ø</u>	+\$	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$Ø	
Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$ 400 +	\$ 2,6/9.06	= \$ <u>3,019.</u> j
State all other regular contributions to the expenses that you list in Scheolinclude contributions from an unmarried partner, members of your household, y friends or relatives.	<i>lule J.</i> our de	pendents, your room	mates, and other	•
Do not include any amounts already included in lines 2-10 or amounts that are a Specify:	not ava	ilable to pay expense	_	. Ø
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S.	result i	s the combined mont al Information, if it app	11. ¶ hly income. plies 12.	\$
8. Do you expect an increase or decrease within the year after you file this fo	orm?			monthly incom
Yes. Explain: I will be able to pay myself	m	re income.		

## Case 19-16157 Doc 10 Filed 05/17/19 Page 25 of 31

-	Fill in this information to identify	y your case:				
	Debtor 1 First Name	Middle Name Last Name	Check if the	his is:		
	Debtor 2		An am	ondo	d filing	
	(Spouse, if filing) First Name	Middle Name Last Name				petition chapter 13
	United States Bankruptcy Court for the	District of	expens	ses as	s of the following	g date:
	Case number (If known)		MM / D	D/ YY	<del>YY</del>	
-	Official Form 106J		-			
	Schedule J: Yo	ur Expenses				12/15
	Be as complete and accurate as p	ossible. If two married people are fil led, attach another sheet to this form	ing together, both are equally in the top of any additional	respor pages	nsible for supply	ing correct
1	Is this a joint case?					
	No. Go to line 2.  Yes. Does Debtor 2 live in a	Separate household?				
:	□ No	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.			
2.	Do you have dependents?	☐ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents' names.		Daughter-			☐ No ☑ Yes
			Daughter	_	<u> 15</u>	☐ No ☑ Yes
			Daughter	_	9	☐ No ☐ Yes
		•	9			☐ No
			<del></del>	_		Yes
				_		☐ No
3.	Do your expenses include expenses of people other than yourself and your dependents?	☐ No ☐ Yes				Yes
Ð	en e	ng Monthly Expenses	anger attartet meren menen gerind dat tit still der de kompropriet der int til 1000 van men meden dit opper de verbelset i de dit delegen.	or Communication and Communication (In-	$\xi_{0}$ is apply statistic of the specimen states and the state of the state is the state of th	ti (Sada de Arija) (1995) en 1994 e senar maria arabas de estado en 1994 e de 2000, en 3 e en 1992 de senar e
E e; a;	stimate your expenses as of your expenses as of a date after the ban pplicable date.  nolude expenses paid for with non	bankruptcy filing date unless you a kruptcy is filed. If this is a supplementash government assistance if you lit on Schedule I: Your Income (Office	ntal Schedule J, check the box know the value of	ment in	e top of the form	and fill in the
		xpenses for your residence. Include	•		Your exper	8.07
	If not included in line 4:			4.	Ψ -1, //	<u> </u>
	4a. Real estate taxes			,	. 7	5
	4b. Property, homeowner's, or re	enter's insurance		4a.	\$ 9	<u> </u>
	4c. Home maintenance, repair, a			4b.	\$ <u>\(\alpha\)</u>	
	4d. Homeowner's association or	·		4c.	a <u>//</u>	<u> </u>
	The state of the s	And the second of the second o		4d.	»/	<u>,                                     </u>

### Case 19-16157 Doc 10 Filed 05/17/19 Page 26 of 31

			Yo	ur expenses
5.	. Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6.				,
	6a. Electricity, heat, natural gas	6a.	\$	230
ı	6b. Water, sewer, garbage collection	6b.	\$	40
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	Ψ <u> </u>	300
	6d. Other Specify:	6d.	\$	8
7.	Food and housekeeping supplies	7.	·	300
8.			Ψ	1200
9.	-	8.	»	
10.	Personal care products and services	9.	\$	
11.		10.	\$	Ø
12.		11.	<b>\$</b>	
	Do not include car payments.	12.	\$	200
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	$\mathcal{Q}$
14.	Charitable contributions and religious donations	14.	\$	0
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance		_	Ó
	15b. Health insurance	15a.	\$	<u> </u>
	15c. Vehicle insurance	15b.	\$	<i>P</i>
	15d. Other insurance. Specify:	15c.	\$	250
	Care modulates. Opesity.	15d.	\$	<u> </u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	
17.	Installment or lease payments:			,
	17a. Car payments for Vehicle 1	17a.	\$	400
	17b. Car payments for Vehicle 2	17b.	\$	$\varnothing$
	17c. Other. Specify:	17c.	\$	9
	17d. Other. Specify:	17d.	\$	6
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106).	18.	•	CD.
19.	Other payments you make to support others who do not live with you.		Ψ	<del></del>
	Specify:	19.	\$	CS
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		¥ <u></u>	
	20a. Mortgages on other property	20a.	\$	$\phi$
	20b. Real estate taxes	20a. 20b.	s	(2)
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	\$	<del>V</del>
	20d. Maintenance, repair, and upkeep expenses	20c. 20d.	\$	CK CK
	20e. Homeowner's association or condominium dues	200. 20e.	\$	<u> </u>

### Case 19-16157 Doc 10 Filed 05/17/19 Page 27 of 31

Debtor	r 1	First Name	Middle Name	Last Name	Case number (if known)	· · · · · · · · · · · · · · · · · · ·	***************************************
21. <b>O</b>	ther. S	Specify:			21.	+\$_	2,920
22. <b>C</b> a	aiculat	te your mont	hly expenses.				
22	2a. Ado	f lines 4 throu	gh 21.		<b>22</b> a.	\$	2,920
22	2b. Cop	by line 22 (mo	nthly expenses	for Debtor 2), if any, from Official Forn	n 106J-2 22b.	\$	Ø
22	2c. Add	l line 22a and	22b. The result	is your monthly expenses.	22c.	\$	2,920
23. <b>Cal</b>	iculate	your month	ly net income.				
23a	. Cor	py line 12 ( <i>yo</i>	ur combined moi	nthly income) from Schedule I.	23a.	\$_	3,019.16
23b	. Cop	oy your month	ily expenses fror	m line 22c above.	23b.	-\$_	2,920.
23c.			onthly expenses or monthly net inc	from your monthly income.	23c.	\$_	99.16
4 Do	VOU ex	rnect an incr	agea or dagrage	se in your expenses within the year			
For mor	examp rtgage	ple, do you ex	pect to finish pa	ying for your car loan within the year of ase because of a modification to the t	or do you expect your		
	,	Explain he	re: Incre	ease in encome		erreteristik tilakulari kiri i anagegind	2000 Mila fire seminakan salam sangan par salam gapan yan bahaman
		Account of a straight plan would display the flower	en 1980 (Seleci va rannakya) sabangangan				

Official Form 106J

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Schedule J: Your Expenses

page 3

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Add Attachment

Fill in this ii	nformation to identify	your case:		, ,			
Debtor 1	SADIGA First Name	ALI YA Middle Name	BROW Last Name	~	Check if this is:		
Debtor 2	\ Santa	Middle Name	Last Name		☐ An amended	filing	
(Spouse, if filing	•			-	A supplement	nt showing post	petition chapter 13
		District of			expenses as	of the following	ı date:
Case number (If known)	***************************************		_		MM / DD / YY	<b>YY</b>	
Official I	Form 106J-2	-					
Sched	dule J-2: E	xpenses for	Sepa	rate Hous	sehold of	<b>Debtor</b>	<b>2</b> 12/15
Debtor 2 hav only with res	e one or more depend pect to expenses for i	ate household expenses dents in common, list the Debtor 2 that are not rep is form. On the top of ar	e dependent oorted on Sc	s on both Schedu hedule J. Be as co	le J and this form. omplete and accur	Answer the querate as possible.	estions on this form If more space is
1. Do you and	d Debtor 1 maintain se	parate households?					
No. Yes	Do not complete this for	rm.					
2. Do you ha	ve dependents?	□ No		Dependent's relati	onship to	Dependent's	Does dependent live
	Debtor 1 but list all ndents of Debtor 2	Yes. Fill out this infe		Debtor 2:		age	with you?
	of whether listed as a of Debtor 1 on	•		<del></del>	<del> </del>		□ No □ Yes
	· e the dependents'						□ No
names.						· · · · · · ·	Yes
							□ No □ Yes
							□ No
				· · · · · · · · · · · · · · · · · · ·			Yes
							□ No
							☐ Yes
expenses	penses include of people other than our dependents, and	□ No □ Yes	ridged Masser was a common assertion with a second				
Part 2: E	stimate Your Ongoi	ing Monthly Expense	8				
	<del></del>	bankruptcy filing date		re using this form	as a supplement	in a Chapter 13 o	ase to report
	of a date after the bar		·	•	••	•	•
include expe	nses paid for with nor	n-cash government assi	stance if vou	know the value o	ıt		
-		d it on Schedule I: Your	_			Your expe	nses
	i or home ownership or the ground or lot.	expenses for your reside	ence. Include	first mortgage pay	ments and 4.	\$	Andrew Committee
If not incl	uded in line 4:						
4a. Real	estate taxes				48	a. \$	
4b. Prop	erty, homeowner's, or r	enter's insurance			41	o. \$	
4c. Hom	e maintenance, repair,	and upkeep expenses			40	c. \$	
4d. Hom	eowner's association of	r condominium dues			40	d. <b>S</b>	

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Debtor 1

First Name Middle Name Last Name

Case number (# knowm)

Case number (# knowm)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	<b>6</b> b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1 <b>6</b> .	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e	\$

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De	ebtor 1	First Name	Middle Name	Last Name		Case number (if known)		
21.	Other. S						21.	+\$
22.	The resu	ult is the mon	nses. Add lines the state of th	Debtor 2. Copy the res	ult to line 22b of Schedule J t		22.	\$
23.	Line not u	used on this f	orm.					
					vithin the year after you file			
	mortgage	ple, do you e payment to i	xpect to finish pa increase or decre	aying for your car loan w ease because of a modif	rithin the year or do you expe fication to the terms of your m	ct your nortgage?		
	☑ No. ☑ Yes.	Explain he	ere:		Mile for distribution of the contract of the c		enter a contrara	

Official Form 106J-2

Print

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Case 19-			
in this information to identify your case	d		
tor1 SAPIQA ALIYA	BROWN Last Name		
First Name Middle Na	me Last Name		
NOT 2 buse, if filing) First Name Middle Na	nme Last Name		
ed States Bankruptcy Court for the:	District of Maryland		
e number <u>19 - 1615 ?</u> nown)			
			☐ Check if this i
			amended filin
Official Form 106Dec			
Declaration About	an Individual	Debtor's Schedule	<b>9S</b> 12/1
taining money or property by fraud in o		ase can result in fines up to \$250,000, or i	mprisonment for up to 20
taining money or property by fraud in cars, or both. 18 U.S.C. §§ 152, 1341, 151	19, and 3671.		mprisonment for up to 20
Sign Below  Did you pay or agree to pay someone	19, and 3671.		
sign Below  Did you pay or agree to pay someone	19, and 3671.	you fill out bankruptcy forms?	
sign Below  Did you pay or agree to pay someone	19, and 3671.	you fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice	
sign Below  Did you pay or agree to pay someone	19, and 3671.	you fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice	
Sign Below  Did you pay or agree to pay someone	19, and 3671.	you fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice	
Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that	19, and 3671.  who is NOT an attorney to help	you fill out bankruptcy forms?  . Attach Bankruptcy Petition Preparer's Notice	
Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person	19, and 3671.  who is NOT an attorney to help	you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice Signature (Official Form 119).	
Did you pay or agree to pay someone  No Yes. Name of person  Under penalty of perjury, I declare that that they are true and correct.	t I have read the summary and	you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice Signature (Official Form 119).	
Sign Below  Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that that they are true and correct.	t I have read the summary and	you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice Signature (Official Form 119).  schedules filed with this declaration and	
Sign Below  Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that that they are true and correct.	t I have read the summary and	you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice Signature (Official Form 119).  schedules filed with this declaration and	
Sign Below  Sign Below  Did you pay or agree to pay someone  No  Yes. Name of person  Under penalty of perjury, I declare that that they are true and correct.	who is NOT an attorney to help til have read the summary and	you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice Signature (Official Form 119).  schedules filed with this declaration and	

Official Form 106Dec

Print

Declaration About an Individual Debtor's Schedules

Save As

Add Attachment

Reset